Guidance Notes For Completing the BNSSG GP Sustainability and Resilience Self Assessment Tool

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1. Introduction

1.1 Background and Development

A working group was formed consisting of GPs, Practice Nurses, Practice Managers, LMC representatives, CCG Clinical Leads, OneCare and the wider system STP colleagues. The aim of the group was consider how to define resilient and sustainable general practice. The group started by thinking about resilience in the way it has been traditionally measured eg One Care's Practice Resilience Assessment Questionnaire and the CCG's Resilience Information Collection Tool.

The group also reviewed the work of the Centre for Applied Resilience in Healthcare (Kings College London, UCL, University of Glasgow) who define resilience through:

- The ability to respond safely to problems as they occur
- The ability to learn from experience and share that experience
- The ability to monitor how things are going
- The ability to anticipate future needs

The group soon realised it needed to think beyond measurement.

In considering this, parallels were identified with Maslow's Hierarchy of Needs and the Resilience and Sustainability and Resilience triangle began to take shape.

The triangle was populated from a practice perspective, and themes were identified running up the triangle.

The triangle can be found on the second tab.

1.2 What is the triangle for?

The aim of the triangle is for practices to use as part of a self assessment to give an indication of the where the practice is in terms of sustainability and resilience. It can also be used to identify areas for improvement, areas of good practice or areas which require additional support. In doing this assessment on a regular basis it is hoped that practices will embed the culture of continuous improvement and in doing so ensure they are sustainable and resilient.

There are no right or wrong answers and the information is for practices and Primary Care Networks to use. An aggregated, anonymised position, will be available to the CCG, OneCare, LMC and STP.

2. The Self Assessment Tool Domains and Related Symbols

The themes that came out of this work have been categorised into domains with associated symbols on the triangle:

Domain	Symbol as represented on the triangle
Business	
Relationships	
Analytics	
Capability	
Responsiveness	
Population Health	

3. The Self Assessment Triangle Levels and Guidance

Each themed domain has a corresponding definition for each level of the triangle:

Domain	Level	Definition
Business	**Base**	The practice can pay its bills and monitors finance.
	Stable	There are stable contracts in place for staff, premises and service delivery. The practice monitors profitability.
	Developing	The practice has a business plan and undertakes financial forecasting.
	Resilient	The practice forecasts 3-5 years ahead and is confident in taking business risks.
	Strategic	The practice and PCN is operating as a stable business and has an evolving, strategic plan. There is individual and collective responsibility for identifying and using available funding within networks and localities.
Relationships	**Base**	Staff are working in defined teams and the practice holds team meetings.
	Stable	There is collaborative working within the practice. Patient satisfaction levels are good.
	Developing	Effective and supporting relationships are in place within PCNs and Localities.
	Resilient	The practice participates as a provider in the wider system.
	Strategic	General practice is driving the direction of the Integrated Care System
Analytics	**Base**	The practice monitors and responds to patient complaints and feedback.
	Stable	Staff carry out audits and review their appointment model from time to time.
	Developing	The practice uses feedback and data to respond to and understand the needs of key groups and their resource use.
	Resilient	Evaluation drives decision making as a business as usual. Project based innovation and improvement are normal ways of working.
	Strategic	The practice works on a continuous cycle of improvement, sharing good practice.
Capability	**Base**	Staff have a sound knowledge of practice systems. Staff complete their stat man training. Staff turnover is within acceptable limit.
	Stable	Staff work within their clinical skill set and achieve good work/life balance. The right skill mix is in place. Staff have their core training needs met.
	Developing	There is good leadership within the practice; staff feel valued, problems are acknowledged and dealt with.
	Resilient	Staff have access to development and enrichment opportunities.
	Strategic	Practices form working relationship with others and collaborate. The practice asks for help when needed and it is always available.
Responsiveness	**Base**	The practice is meeting core clinical safety requirements and is CQC compliant.
	Stable	The practice is able to recover from short term disruptions to the service.
	Developing	The practice has support arrangements in place through its PCN when difficulties arise.
	Resilient	The practice feels empowered to solve problems and uses trusted locality colleagues for additional support.
	Strategic	General practice can recover quickly from challenges by drawing on system wide support.
Population Health	**Base**	The practice has acceptable QOF and Primary Care Indicators.
	Stable	Good practice clinical pathways are developed and followed for priority disease groups (e.g. Diabetes)
	Developing	Staff proactively target 'at risk' groups of patients.
	Resilient	General practice is meeting the needs of the population through case finding and early diagnosis.
	Strategic	The practice works with other providers to plan population health.

4. What to do - how to use the assessment tool.

It is recommended that practices look at the self assessment together as a team.

The first column, in the grey box, has the level of the triangle and an overarching question to guide your thinking for your answers in the section.
Start at base level, and move across.
Each subsequent column has a domain heading in blue e.g. Business, with a further overarching question to guide your thinking for your answers.
Work your way through the questions in the white boxes, **select your answer from the drop down menu: Yes, No, Partially, Unknown.**
If you would like to add comments to support your response please add them in a different colour font to the appropriate questions box.
Once you have answered the box will turn the appropriate colour to reflect your answer.
Once you have completed base move down to the next level - stable - continue the steps above for stable and continue moving down until you have completed all five levels.

Once you have completed all the questions, this will form your baseline or starting position.
The first time you complete the self assessment it will generate some interesting discussions.
Make sure you save a copy with the date so you can use as a comparison the next time you complete the self assessment.
It is likely and hoped that from the discussions you will start to form actions that could be carried out to improve day to day working in the practice for both staff and patients.
Some actions you will be able to put in place straight away, others will need thinking about and time.

It is suggested that you complete the self assessment tool every quarter to provide feedback on progress, keep the momentum going help ensure the improvement is sustained.

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How could we DEFINE resilience?

Strategic -
practices play their part in the Integrated Care System

Resilient -
the practice team feel empowered to work in the wider system to support excellent patient care

Developing -
the practice MDT works with others and uses data to improve care

Stable -
the practice team works hard to deliver improvements in patient care

Base -
the practice is coping on a day-to-day basis

- Every practice is operating as a stable business and has an evolving, strategic plan.
- There is individual and collective responsibility for identifying and using available funding
- General practice is driving the direction of the Integrated Care System
- Practice works on a continuous cycle of improvement, sharing good practice
- Practices form working relationships with others and collaborate. They ask for help when needed and it is always available
- General practice can recover quickly from challenges by drawing on system wide support
- Practice works with other providers to plan population health

- Practice forecasts 3-5 years ahead and is confident in taking business risks
- Practice participates as a provider in the wider system
- Evaluation drives decision making as a business as usual. Project based innovation and improvement are normal ways of working
- Staff have access to development & enrichment opportunities
- Practice feels empowered to solve problems and uses trusted locality colleagues for additional support
- General practice is meeting the needs of the patient population through case finding and early diagnosis

- Practice has a business plan and undertakes financial forecasting
- Effective and supportive relationships are in place within PCNs and localities
- Practice uses feedback and data to understand the needs of key groups and their resource use
- There is good leadership within the practice; staff feel valued, problems are acknowledged and dealt with
- The practice has support arrangements in place through it's PCN when difficulties arise
- Staff proactively target at risk groups of patients

- There are stable contracts in place for staff, premises and service delivery. The practice monitors profitability
- There is collaborative working within the practice
- Patient satisfaction levels are good
- Staff carry out audits and review their appointment model from time to time
- Staff work within their clinical skill set and achieve good work/life balance
- The right skill mix is in place
- Staff have their core training needs met
- The practice is able to recover from short-term disruptions to the service
- Good practice clinical pathways are developed and followed for priority disease groups (eg. diabetes)

- The practice can pay its bills and monitors finances
- Staff are working in defined teams and the practice holds team meetings.
- Practice monitors and responds to complaints and patient feedback
- Staff have a sound knowledge of practice systems. They complete their stat and man training and turnover is within acceptable limits
- The practice is meeting core clinical safety standards and is CQC compliant
- The practice has acceptable QOF and Primary Care indicators

Sustainable and resilient general practice

DRAFT

Example BNSSG GP Practice Sustainability and Resilience Self Assessment Tool

	Business How does your practice pay its bills and monitor finances?		**Relationships** How does your practice define teams and manage staff turnover?		**Analytics** How does your practice monitor and respond to complaints and patient feedback?		**Capability** How does your practice ensure staff have a sound knowledge of practice systems?		**Responsiveness** How is your practice meeting core clinical safety standards and CQC compliance?		**Population Health** How does your practice gain acceptable QOF and Primary Care Indicator scores?	
Base How does the Practice operate day to day?	Do you have a bank account and are you solvent?	**Yes**	Do you hold full team meetings monthly?	**No**	Do you have an easy process for your patients to follow to make a complaint?	**Partially**	Do your staff complete their stat and man training?	**Unknown**	Are complete records kept of basic safety checks eg fridge temps?		Is your QOF exception reporting appropriate, and are all staff working to the same understanding?	
Stable How does the Practice team work operationally towards medium goals?												
Developing How does the Practice as a MDT work with others and use data to improve care?												

Resilient How do you empower your Practice Team to work within the wider system and support excellent patient care?												
Strategic How does the Practice play its part in the Integrated Care System?												